



377 Research Parkway, Suite 2-D
Meriden, CT 06450-7160
203-238-1207

TESTIMONY RE: Proposed Bill No.6550 AN ACT CONCERNING MEDICAID PROVIDER
AUDITS
COMMITTEE ON HUMAN SERVICES
FEBURARY 12,2015

Good Evening, Senator Moore and Representative Abercrombie and esteemed members of the Education Committee.

Thank-you for the opportunity to provide testimony on behalf of the Connecticut Nurses' Association (CNA) related to Proposed Bill No.6550 AN ACT CONCERNING MEDICAID PROVIDER AUDITS.

I am Mary Jane Williams Ph.D., RN current chairperson of Government Relations Committee for the Connecticut Nurses Association. I speak in support of the concepts Explicated in the brief language provided in this Proposed Bill.

After careful consideration of the Issues of concern in this proposed legislation and understanding the intent of this proposed legislation it would be advantageous for the committee to consider the following:

It is essential that the development of State Audit guidelines do not result in redundant work for providers. Audit guidelines should parallel guidelines utilized at the Federal level do decrease the projected immense amount of work expected of practitioners in preparing for these audits.

It would be best to utilize experts in the area of Audit design in order to create a system that does not increase workload, repetition and increase administrative challenges in practice arenas that are already challenged by an increase in Federal Audits and ultimately will result in a decrease in efficacy of the provider care. It is essential that the burden of multiple audits does not result in a decrease in the quantity and quality of care.

We are more than willing to discuss this process with you and experts in the field in order to develop sound audit processes. We are also more than willing to work with other involved groups in moving this legislation forward if we can create a safety net and provide confidentiality and privilege of documentation for providers related to all records that are audited across all provider disciplines. This is essential to protect the public we all serve.

Thank You

Mary Jane M. Williams PhD., RN
Chair Government Relations
Connecticut Nurses Association
Professor Emeritus CCSU
860 997 6844
rxwilliams43@aol.com

1. legislate each emergency diagnosis, need to come up with another solution
2. RNs by regulation are responsible for the care of all the children in the school
3. Allowing others to administer medication then happens under delegation, the nurse's license
4. Education Committee should consider this request in terms of the ACA and changes in health care delivery system, which includes nurses practicing the full extent of their education and training. BOE needs

to recognize the value of the nurse in their community as well as the best use of their time so that they can better serve the medical, health and safety needs of the school

5. If BOE will not hire enough nurses to meet the needs of children in school and support the health and safety of the school environment that risk should not be assumed by the nurse but by the board of education.

6. RNs in the school do not fully participate in meetings on children with special needs, etc.